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CONFIRMATION NO. 2621

SERIAL NUMBER 10/694,627	FILING OR 371(c) DATE 10/27/2003 RULE	CLASS 600	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. 1258.01-6172US
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APPLICANTS

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CONTINUING DATA *****

FOREIGN APPLICATIONS *****

REQUIRED, FOREIGN FILING LICENSE GRANTED **
 1/26/2004

Foreign Priority claimed USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY UT	SHEETS DRAWING 8	TOTAL CLAIMS 52	INDEPENDENT CLAIMS 6
Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Met after Allowance			
Examiner's Signature		Initials			

ADDRESS

4247

TITLE

Apparatus for noninvasively measuring hematocrit and associated methods

FILING FEE RECEIVED 1760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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